

USK URBAN DISTRICT COUNCIL



ANNUAL REPORT 1966

OF THE

MEDICAL OFFICER OF HEALTH

AND THE

SURVEYOR & CHIEF PUBLIC HEALTH INSPECTOR

COUNCIL OFFICES,  
BRIDGE STREET,  
USK.....MON.



USK URBAN DISTRICT COUNCIL

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SURVEYOR & CHIEF PUBLIC HEALTH INSPECTOR

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ASSISTANT SURVEYOR & ADDITIONAL PUBLIC HEALTH INSPECTOR

\* W.L. DAVIES, M.A.P.H.I., M.R.S.H., C. & G., FULL TECH. A.M.I.P.H.E.

\* Joint with Pontypool R.D.C.



Madam Chairman, Mrs Sweet and Gentlemen,

Is there a need for public health services and preventive medicine today? To all thinking people the answer to this question is obviously yes; and not only for financial reasons, important though these may be. It is clear from the number of articles in newspapers and journals, and from various interviews on radio and television that there is an official and a popular demand for greater emphasis on the maintenance of good health.

Recent scientific investigation has shown that the existence of disease is like an iceberg. The amount of known illness can be represented by the small exposed portion of the iceberg while the undetected and untreated sickness forms the vast submerged area. It is of prime importance to reveal this unknown or incipient illness in the community. With earlier detection there may be a much better chance, indeed, it may be the only chance of successful treatment. Obviously it is essential to secure the re-orientation of the National Health Service towards discovering a person's medical needs and away from the existing 'care on demand' by the patient. It is true that modern medicine is gradually becoming increasingly concerned with patients who have not yet developed any symptoms but much more needs to be done.

In many cases it is only through early diagnosis and appropriate treatment that we can hope for either complete success or a partial cure with a delay in the advance of disease and a reduction in later handicaps. Early detection of disease by screening has grown up mainly in the public health field, first of all, in relation to communicable diseases such as Pulmonary Tuberculosis and Venereal Diseases. As communicable disease has gradually declined in importance, attention now naturally turns to the increasing prevalence of non communicable diseases such as hearing defects, Diabetes, Cancer of the breast and cervix, Hypertensive disorders etc.

It has been estimated that one person in ten is suffering from some, as yet, undiagnosed condition. It is also said that there are more than two million untreated hypertensives and about  $1\frac{1}{2}$  million people with conspicuous psychiatric morbidity amongst the adult population of Britain. We are more and more aware of the tragedy of old people who fall into such a state of dependency that they have to be admitted, if lucky, to some institution from which they know too well they will never emerge.



It seems obvious that health departments should now be more and more engaged in this preventive and diagnostic field, with general practitioners and local authority workers functioning side by side. In recent years we have been able to see the excellent results of Infant Welfare Clinics in our bouncing bonnie babies. We have poured so much orange juice, cod liver oil and welfare foods down the throats of infants that they have often been described as miniature Samsons. Of course, some mothers from the poorer homes, who are most in need of advice and help, are still seldom seen at any clinic. Fortunately these are very much in the minority but they necessitate repeated home visits from various public health officials and social workers. Immunisations and Vaccinations at our clinics have been so successful that we can now take heart in the knowledge that the control of acute infectious disease is no longer a marathon task. However, we must not forget that the price of success is not only energy but eternal vigilance.

The school health service can also claim its share of the cake. We can now safely say that most children are sound in mind and limb. At the same time we must not minimise the importance of early ascertainment treatment and continued care of the physically and mentally handicapped, the delicate and the maladjusted, even though their numbers may be comparatively small.

In view of these attainments and the obvious needs of other potentially ailing section of the community one suspects that we should now devote less time on healthy youngsters and more on early ascertainment and treatment of handicapped children and a thorough medical examination of older people.

Monmouthshire is off to a good start. A chiropody clinic is now firmly established at Ty-Brith, Usk. Cytology clinics are also held in neighbouring towns and their value can be appreciated by a glance at the statistics shown elsewhere in this report. Perhaps we should now provide facilities for the periodic medical examination of older groups of the population. Having arrived at middle-age, most people begin to realise that they are not immortal and to think seriously about their health. Under prevailing circumstances, Doctors may be too busy for such periodic medical examinations but with some rearrangements and the provision of more health centres the numbers of adult clinics could be increased and a closer liason established between local authority staffs and family doctors. If people could be sure of getting a thorough medical check-up by previous appointment without having to wait unduly, I feel a large proportion of the community would, in time, respond. At the same time, the public could be educated to be sensibly, not morbidly, alert to the early symptoms of cancer, diabetes, heart disease as well as certain other conditions.





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# VITAL STATISTICS - 1966

Area .. .. . 655 acres  
 Estimated Population .. .. . 2100  
 Number of inhabited houses .. .. . 652  
 (according to Rate Book on 31.12.66)  
 Rateable Value .. .. . £49,627  
 1d Rate .. .. . £186

1966

<u>LIVE BIRTHS</u>	<u>M</u>	<u>F</u>	<u>TOTAL</u>
Legitimate	21	25	46
Illegitimate	<u>1</u>	<u>-</u>	<u>1</u>
TOTAL .....	22	25	47

<u>LIVE BIRTH RATE</u>	<u>USK</u>	<u>COUNTY</u>	<u>ENGLAND &amp; WALES</u>
per 1000 population	22.38	17.53	17.7
Comparability Factor =	1.07		
Adjusted live birth rate =	22.38 x 1.07 =	23.95	
" " " " County =	17.88		

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<u>STILL-BIRTHS</u>	<u>M</u>	<u>F</u>	<u>TOTAL</u>
Legitimate	-	-	-
Illegitimate	-	2	2
<u>STILL-BIRTH RATE</u>	<u>USK</u>	<u>COUNTY</u>	<u>ENGLAND &amp; WALES</u>
per 1000 live & still-births	40.8	20.03	15.4

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<u>DEATHS</u>	<u>M</u>	<u>F</u>	<u>TOTAL</u>
All Causes	6	11	17
Death rate per 1000 population	<u>USK</u>	<u>COUNTY</u>	<u>ENGLAND &amp; WALES</u>
	8.1	11.92	11.5
Comparability Factor =	1.2		
Adjusted death rate =	8.1 x 1.2 =	9.72	
" " " County =	13.59		

<u>DEATHS FROM CANCER</u>	<u>M</u>	<u>F</u>	<u>TOTAL</u>
	3	2	5
<u>DEATHS FROM LUNG CANCER</u>	1	-	1



DEATHS DUE TO PREGNANCY, CHILD-BIRTH, ABORTION = 0

Maternal Mortality Rate USK COUNTY  
(Rate per 1000 live & still-births) - 0.47

INFANT MORTALITY

Infant Mortality Rate USK COUNTY ENGLAND & WALES  
(Rate per 1000 total live births) - 24.99 19.0

Neonatal Mortality Rate - first 4 weeks  
(Rate per 1000 total live births) - 16.06 12.9

Early Neonatal Mortality Rate - under 1 wk - 14.11 11.1

Perinatal Mortality

(Still-births & infant deaths under 1 wk  
per 1000 total live & still-births) 40.8 33.87 26.3

Perinatal Mortality in Usk Urban District 1960-66

Year	Number of First Week Deaths	Number of Still-births	Perinatal Mortality Rate
1966	-	2	40.8
1965	-	-	-
1964	-	-	-
1963	-	-	-
1962	-	-	-
1961	1	4	142.86
1960	-	-	-

Perinatal Mortality 1960-66

Usk Urban District, Pontypool Rural District & Monmouthshire County

Year	Usk Urban District	Pontypool Rural District	Monmouthshire County
1966	40.8	28.27	33.87
1965	-	22.1	35.98
1964	-	26.5	37.25
1963	-	30.12	35.82
1962	-	17.7	38.85
1961	142.86	25.79	39.9
1960	-	29.4	42.0



Causes of Death at different periods of life during 1966 in  
Usk Urban District

Cause of Death	Sex	Total all ages	Under 4 weeks	4 wks & under 1 year	Age in Years							
					1-	5-	15-	25-	35-	45-	55-	65-
Malignant Neoplasm Lung Bronchus	M	1										1
	F	-										
Malignant Neoplasm Breast	F	2										
Other Malignant & Lymphatic Neoplasms	M	2									2	
	F	-										
Vascular Lesions of Nervous System	M	-										
	F	2										
Coronary Disease Angina	M	1										1
	F	2										1
Other Heart Disease	M	1										1
	F	-										
Pneumonia	M	-										
	F	2									1	
Other defined & ill-defined diseases	M	-										
	F	1										1
All other accidents	M	-										
	F	2			1							
TOTAL ALL CAUSES	M	6									2	4
	F	11			1						1	2

TUBERCULOSIS

NOTIFIED Pulmonary M.O. F.1.

Non Pulmonary M.O. F.O.

DEATHS " M.O. F.O.

" " M.O. F.O.



NOTIFIABLE INFECTIOUS DISEASES (other than Tuberculosis)

Classified according to age and sex.

Disease	Sex	Age					Total
		0-4	5-9	10-14	15-24	25+	
Diphtheria	M						
	F						
Scarlet Fever	M						
	F						
Meningococcal Infection	M						
	F						
Measles	M	1	1				2
	F	3	1	2			4
Whooping Cough	M						
	F		1				1
Polionyelitis	M						
	F						
Dysentery	M						
	F						
Food Poisoning	M						
	F						
Erysipelis	M						
	F						





# VACCINATION AGAINST SMALLPOX

## Numbers Vaccinated

AGE GROUP	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966
Under 1 yr	15	17	20	22	18	15	13	3	-	-	-
1 - 4 yrs	11	2	7	2	5	4	42	5	11	22	19
5 - 14 yrs	4	1	3	1	2	5	212	2	-	-	1
15 yrs +	7	12	10	7	4	5	639	2	-	-	-
TOTAL	37	32	40	32	29	30	906	12	11	22	20

In addition, there was 1 revaccination.

# IMMUNISATION AGAINST DIPHTHERIA & WHOOPING COUGH

## Numbers Immunised

AGE GROUP	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	
Under 5 yrs	39	38	17	13	9	39	30	36	60	58	31	Diphtheria
			20	14	10	30	29	48	59	58	31	Whoop.
						29	30	40	55	62	1	Tetanus
5 - 14 yrs	22	6	24	1	1	5	-	2	10	5	1	Diphtheria
					1	2	-	2	10	13	1	Whoop.
						2	2	3	15	11	18	Tetanus
TOTAL	61	44	41	14	10	44	30	38	70	63	32	Diphtheria
			20	14	11	32	29	50	69	71	32	Whoop.
						31	32	43	70	73	19	Tetanus

In addition, there were 19 "Booster" injections of Diphtheria Prophylactic given, 19 of Whooping Vaccine and 9 of Tetanus.



CYTOLOGY STATISTICS FOR 1966 (MONMOUTHSHIRE)

Name of Clinic	Appts. sent		Appts. kept		No. of Infections	New Cases Only		Ca in Si
	New Cases	Recalls	New Cases	Recalls		No. Ref'd to Gynaecologist	Other Conditions	
Abergavenny	378	17	261	11	30	-	18	-
Abertillery	303	1	202	1	17	-	1	-
Bliana	276	17	151	8	22	1	16	-
Caldicot	172	4	118	3	6	-	3	-
Chepstow	319	21	233	12	22	1	9	-
Cwmbran	529	23	387	15	38	-	5	-
Croesyceiliog	402	26	291	19	29	3	11	-
Ebbw Vale	270	11	182	7	22	4	7	1
Monmouth	358	14	174	9	18	3	2	-
Newport	356	41	237	20	29	2	3	-
Pontypool	922	86	570	59	72	2	23	1
Pontllanfraith	1,167	76	729	49	96	4	25	1
Risca	587	29	410	22	59	2	36	-
Tredegar	285	3	177	5	21	-	6	1
	6,324	374	4,132	240	481	22	170	4

Yours faithfully,

S.H. JAMES, D.Sc., M.B., B.Ch., D.P.H.

Medical Officer of Health.



Madam Chairman, Mrs Sweet and Gentlemen,

I wish to submit my report of the work carried out in the district during the year 1966.

### INSPECTIONS

Infectious Diseases .....	1
Houses .....	58
Re-inspections .....	45
Improvement Grants .....	18
Council Houses .....	45
Nuisances .....	9
Premises where food is prepared and sold .....	38
Factories and Workshops .....	17
Public Conveniences .....	15
Water Supplies .....	30
Refuse Collection and Disposal .....	52
Miscellaneous .....	158
Sewerage and Drainage .....	41
Sewage Works .....	30
Roads .....	41
Street Lighting .....	17
Cattle Market .....	8
Slaughterhouse .....	163
Shops, Offices & Railway Premises .....	40
Petroleum Licensing .....	9

### OVERCROWDING

Very little overcrowding exists in Usk. This is due to the fact that persons living in apartments in overcrowded conditions have been given priority by the Council when council houses become vacant.

Ten flatlets and six bungalows for elderly persons were erected during the year.





## CARAVANS

A few caravans were stationed in the district during the year, but only for a very short period.

The only ground used for caravan purposes is the market ground which is used solely for the accommodation of caravans during the Annual Trinity Fair. Water supply and sanitation are provided.

## HOUSING

### 1. Inspection of dwelling houses during the year

- |      |     |   |     |
|------|-----|---|-----|
| (i)  | (a) | Total number of dwelling houses inspected for housing defects under Public Health and Housing Acts. | 58  |
|      | (b) | Number of inspections made for its purpose  | 103 |
| (ii) |     | Number of dwellings found not to be in all respects reasonably fit for habitation                   | 17  |

### 2. Remedy of defects during the year without Servicing of Formal Notice

Number of defective dwellings rendered fit in consequence of informal action by the Local Authority or their officers	3
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### 3. Action under Statutory Powers during the year

#### (i) Proceedings under the Housing Act 1957

- |     |  |   |
|-----|--|---|
| (a) | No. of dwelling houses in respect of which notices were served requiring repairs | - |
| (b) | No. of dwelling houses in respect of which Demolition Orders were made           | - |
| (c) | No. of dwelling houses in respect of which Closing Orders were made              | 8 |
| (d) | No. of dwelling houses which were rendered fit after service of Formal Notice    | - |

#### (ii) Proceedings under the Public Health Act

- |     |   |   |
|-----|---|---|
| (a) | No. of dwelling houses in respect of which notices were served requiring defects to be remedied | 6 |
| (b) | No. of dwelling houses in which defects were remedied after service of Formal Notice            |   |
|     | i) By owners  | 6 |
|     | ii) By Local Authority in default of owners   | - |



## WATER SUPPLY

The Town is served by the Pontypool Water Company's Undertaking and with the exception of four houses, which are distant from the mains, all houses have piped water supply. Nineteen samples have been submitted to the Public Health Laboratories and were found to be satisfactory in all cases.

During the year the Pontypool & District Water Company carried out improvements by increasing the size of the water main in a section of Monmouth Road, Usk, and due to this action the poor supply to Ladyhill, mentioned in last year's report, has been considerably improved and no further complaints of poor supply have been received.

## SEWAGE DISPOSAL

The majority of houses in the district are connected to the Town sewers. The sewage disposal plant deals with all sewage and is operating successfully, though very regular attention is required at the pumping station in connection with pump maintenance, and also some difficulty is caused with the removal and disposal of sewage sludge.

The two small pumps at the pumping station require overhauling. This work will be undertaken by the Manufacturers next year.

## RODENT CONTROL

The sewers are treated twice a year and no heavy infestations have been reported.

The sewage disposal works and refuse tip are regularly treated to keep any infestation to a minimum. During the year 15 properties were inspected and treated for minor infestations.

## FOOD HYGIENE

In general the premises are satisfactory and a good standard is maintained. However, in view of the limited time which the officers can spend in the Urban District, a very close supervision is not possible at present.

### FOOD HYGIENE (GENERAL) REGULATIONS 1960

No. of Premises - 39.

Trade & No.	No. of Premises fitted to comply with Reg. 16.	No. of Premises to which Reg.19 applies.	No. of Premises fitted to comply with Reg. 19
Licensed Premises 13	13	13	13
Cafes 3	3	3	3
Fruit & Veg. 3	3	3	3
General Grocers 10	10	10	10
Sweets & Tobacco 5	5	-	-
Butchers 4	4	4	4
Fish & Chips 1	1	1	1
Totals 39	39	34	34



SLAUGHTER HOUSES ACT 1957 - Slaughter of Animals  
(Amendment Act)

There is only one slaughterhouse in the area.

Number of carcasses inspected and condemned

	<u>Cattle</u>	<u>Sheep/Lambs</u>	<u>Pigs</u>	<u>Calves</u>
Number killed	69	586	140	8
Number inspected	69	586	140	8
% Inspected	100	100	100	100

All Diseases (except Tuberculosis)

Whole carcass condemned ..... Nil

Carcasses of which some part or organ was condemned .. 79

Tuberculosis Only

Whole carcass condemned ..... Nil

Carcasses of which some part or organ was condemned .. 3

No. of visits for meat inspection ..... 163

HOUSING - IMPROVEMENTS

During the year the Council approved three Standard Grant applications.

Every encouragement is given to owners of suitable properties to improve and modernise their houses. The raising of the general level of older housing accommodation is well worthwhile.

The 1964 Act which came into operation in August 1964 increased the maximum standard grant to £350.

BUILDING BYE-LAWS

There was some increase in private house building during the year, and 44 plans were submitted to the Council for consideration. This figure compares favourably with that of 41 for 1965.



### PETROLEUM LICENSING

There are four premises in the district where petroleum spirit is stored. Nine visits to these premises were made during the year. Installations are satisfactory.

### REFUSE COLLECTION AND DISPOSAL

A weekly collection is in operation and is carried out on behalf of the Council by the Pontypool Rural District Council. This causes no complications as the responsible officers are employed jointly by the two Councils - See last paragraph of report.

All tipping is carried out at the tip on the outskirts of the town. The conditions of the tip have improved considerably due to the hiring of a bulldozer. The problem of having to dispose of considerable quantities of paper and card is causing some concern and difficulty.

### FACTORIES ACT

1. Inspection for purposes of provisions as to health (including inspections made by the Public Health Inspector).

Premises	Number on Register	Number of		Occupiers Prosecuted
		Inspections	Written Notices	
(1) Factories in which sections, 1,2,3,4,6, are to be enforced by the Local Authority	4	7	-	-
(2) Factories not included in above in which sect. 7 is enforced by Local Authority	7	10	-	-
(3) Other premises in which sect. 7 is enforced by the Local Authority	-	-	-	-
TOTAL	11	17	-	-





# FACTORIES ACT

## 2. Cases in which defects were found.

### NUMBER OF DEFECTS

Particulars	Found	Remedied	Referred to by H.M.I.	Prosecutions
Want of cleanliness (S.1)	3	3	-	-
Overcrowding (S.2)	-	-	-	-
Unreasonable temperature	-	-	-	-
Inadequate ventilation	-	-	-	-
Ineffective drainage of floors	-	-	-	-
<u>Sanitary Conveniences (S.7)</u>				
a) Insufficient	-	-	-	-
b) Unsuitable or defective	-	-	-	-
c) Not separate for sexes	-	-	-	-
Other offences against the Act (not including offences relating to outwork).	-	-	-	-
TOTAL	3	3	-	-

Outworkers ... Nil

Steady progress has been made during the year.

I would like to thank the Chairman and Members of the Council and my fellow Officers for the help and co-operation I have received during the year.

This is the last report which I shall have the honour of presenting to you. The Pontypool Rural District Council decided, towards the end of the year, to terminate the system of sharing with you the services of myself and Mr. Davies.

I am,

Madam Chairman, Mrs Sweet and Gentlemen,

H. PEARSON, A.M.I.S.E., M.A.P.H.I., A.F.S. (ENG).

Surveyor and Chief Public Health Inspector.





